

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002797

FILED
Jan 04, 2008
Secretary of State

Entity Name: FORWARD WITH CHRIST EVANGELISTIC ASSOCIATION, INC.

Current Principal Place of Business:

3614 HWY 231
COTTONDALE, FL 32431 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 722
COTTONDALE, FL 32431 US

New Mailing Address:

FEI Number: 59-3517758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EUBANKS, CHARLES R
3614 HWY 231
COTTONDALE, FL 32431 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: EUBANKS, CHARLES R
Address: 3614 HWY 231
City-St-Zip: COTTONDALE, FL 32431

Title: DVP () Delete
Name: EUBANKS, CAMILLE M
Address: 3614 HWY 231
City-St-Zip: COTTONDALE, FL 32431

Title: D () Delete
Name: MALDONADO, MARY
Address: 4755 HWY 71
City-St-Zip: GREENWOOD, FL 32443

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAMILLE EUBANKS

DVP

01/04/2008

Electronic Signature of Signing Officer or Director

Date